



**Office of Pharmacy Service
Prior Authorization Criteria**

Increlex (mecasermin)

Increlex will be authorized if the following criteria are met:

- 1. The patient is less twenty-one years old AND has a**
- 2. Diagnosis or growth failure due to severe* primary IGF-1 deficiency (documentation of low IGF-1 must be provided) OR**
- 3. Diagnosis of growth hormone gene deletion in a patient who has developed neutralizing antibodies to growth hormone (GH)**

*Severe primary IGF-1 deficiency (IGFD) is defined by height standard deviation score ≤ -3.0 and basal IGF-1 standard deviation score ≤ -3.0 and normal or elevated growth hormone (GH). Severe Primary IGFD includes classical and other forms of growth hormone insensitivity. Patients with Primary IGFD may have mutations in the GH receptor (GHR), post-GHR signaling pathway including the IGF-1 gene. They are not GH deficient, and therefore, they cannot be expected to respond adequately to exogenous GH treatment.

Tercica Pharmaceutical

Reviewed and Approved by the DUR Board

May 23, 2012